Effective November 10, 1998 OA 203672													72	
CLAIMS AS FILED - PART I (Column 2)								_	SMALL ENTITY OTHER TO					
FOR			NUMB	UMBER FILED		NUMBER EXTRA		7	RATE	FEE	7	RATE	FEE	
8/	SIC FEE							11		380.00	OR		760.00	
TOTAL CLAIMS			7	minus	20=	•		1 [X\$ 9=	· .	OR	2000	/	
INDEPENDENT CLAIMS			/			• • /		1	X39=	1	٦,,	X78=		
ML	Total * 7 Minus ** 3 ** X39= OR X78= X78= ULTIPLE DEPENDENT CLAIM PRESENT ** ** ** ** ** ** X39= OR X78= ** ** ** ** ** ** ** ** **													
• H	If the difference in column 1 is less than zero, enter "0" in column 2							- L		+	┩┈	<u> </u>		
					IOIAL	·	JOR		760					
(Ocidital 2)									OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENTA)		REMA AF				HIGHEST NUMBER NEVIOUSLY	PRESENT		RATE	TIONAL		RATE	ADDI- TIONAL FEE	
		 '	7		•	20	. ~	lΓ	X\$ 9=		OR	X\$18=		
	Independent • / FIRST PRESENTATION		N OF MI		PEND	S AND	· <u> </u>		X39=		OR	X78=	\/	
				ALIFUE DE	PENU	ENI COMM		' [+130=		OR	+260=	X	
	/							Ar	TOTA		OR	YOTAL ADDIT, FEE	/ \	
_	10/27/05		mn 1)			olumn 2)	(Column 3)	. ~	, , , , , , , , , , , , , , , , , , ,	-		POUI S. PEC		
5 L	•	REMA	NMS VINING TER PMENT		PA	(IGHEST (UMBER EVIOUSLY (AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE:		RATE	ADDI- TIONAL FEE'	
	Total Independent	• //	(Minus	-	20	•		X\$ 9=		OR	X\$18=		
	FIRST PRESE	NTATIO	_	Minus LTIPLE DEI	PEND	ン	- /		X39=		OR	X78=		
								Ŀ	+130=		OR	+260=		
								AD	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE	/	
-	αi	(Colu	mn 1)				(Column 3)	,						
AMENOMENT C	1/25/66	REMA AFT AMENE	ER		PRI	IGHEST LUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 0		Minus	- 2	20	=	\	(\$ 9-		OB-	X\$18≖	<u>ئ</u>	
	Independent	<u>• /</u>		Minus	***	3	=	 	V20-		3	\		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								H	X393		OR	X78=		
• If the entry in column 1 is tess than the entry in column 2, write "0" in column 3.									130=		OR	+260=		
 ¦∤	""I the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OR ,	TOTAL VODIT. FEE		
The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE														

Application or Docket Number